ttor/ey's Docket No.: 06666-097001/USC-2958

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Schott, et al.

2825 Art Unit:

Serial No.: 10/038,063

Examiner:

Paul Dinh

Filed

Title

: January 3, 2002

: SYSTEM LEVEL APPLICATIONS OF ADAPTIVE COMPUTING

(SLAAC) TECHNOLOGY

RECEIVED **CENTRAL FAX CENTER** 

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

JAN 2 6 2005

## AMENDMENT

In response to the Office action mailed July 26, 2004, please amend the application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks/Arguments begin on page 10 of this paper.

02/02/2007 - FURDL - 05/55 - FF - 1997/20/20 0.0.03 01 FC:2253

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104 4 5 5 01 FC:2201

CERTIFICATE OF TRANSMISSION BY FACSIMILE

I hereby certify that this correspondence is being transmitted by faceiralte to the Patent and Trademark Office on the date indicated below.

January 26, 2005

Date of Transmission

Signature

Etrenda Lewis

Typed or Printed Name of Person Signing Certificate

PAGE 2/12 \* RCVD AT 1/26/2005 9:52:40 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-1/0 \* DNIS:8729306 \* CSID:1 858 678 5099 \* DURATION (mm-ss):03-42

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10038063

| CLAIMS AS FILED - PART I   |  |                                  |                |             | (Column 2)                          |                  |      | SMALL ENTITY TYPE   |                        | OR | OTHER THAN SMALL ENTITY |                        |
|--|--|----------------------------------|----------------|-------------|-------------------------------------|------------------|------|---------------------|------------------------|----|-------------------------|------------------------|
| TOTAL CLAIMS   |  |                                  | (Column 1)     |             | (Coldini 2)                         |                  | ſ    | RATE                | FEE                    | Σ  | RATE                    | FEE                    |
| TOTAL CLAIMS   |  |                                  | 43             |             | ARIMOS                              | DEVTRA           | ŀ    | BASIC FEE           | 370.00                 | OR | ASIC FEE                | 740.00                 |
| FOR  |  |                                  | NUMBER FILED   |             | NUMBER EXTRA                        |                  | ŀ    |                     |                        |    |                         |                        |
| TOTAL CHARGEABLE CLAIMS  |  |                                  | 43 minus 20=   |             | 23                                  |                  |      | X\$ 9=              |                        | OR | X\$18=                  |                        |
| INDEPENDENT CLAIMS   |  |                                  | 3 minus 3 =    |             |                                     |                  |      | X42=                |                        | OR | X84=                    |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |                                  |                |             |                                     |                  |      | +140=               |                        | OR | +280=                   |                        |
| * If the difference in column 1 is less than zero, enter   |  |                                  |                |             |                                     | olumn 2          | •    | TOTAL               |                        | OR | TOTAL                   |                        |
| CLAIMS AS AMENDED - PAR' (Column 1) (Column 1)   |  |                                  |                |             | <b>T   </b><br>mn 2)                | (Column 3)       |      | SMALL E             | NTITY                  | OR | OTHER<br>SMALL          |                        |
| AMENDMENT A  | λψ •                                     | REMAINING<br>AFTER               |                | NUM         | BER                                 | PRESENT<br>EXTRA |      | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total                                    | * (()                            | Minus          | **          | $\frac{1}{2}$                       | =                |      | X8-985              |                        | OR | X\$ 78                  |                        |
|  | Independent                              | • 4                              | Minus          | ***         | 3                                   | = /              |      | ×420                | 100                    | OR | X8AXX)                  |                        |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT |                                  |                |             | T CLAIM                             |                  |      | +1861               |                        | OR | +360                    |                        |
|  |  |                                  |                |             |                                     |                  | . (  | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE     |                        |
|  |  | (Column 1)                       |                | (Colu       | ımn 2)                              | (Column 3)       |      |                     |                        |    |                         |                        |
| AMENDMENT B  |  | CLAIMS REMAINING AFTER AMENDMENT |                | NUI<br>PREV | HEST<br>MBER<br>VIOUSLY<br>D FOR    | PRESENT<br>EXTRA |      | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total                                    | *                                | Minus          | **          |                                     | =                |      | X\$ 9=              |                        | OR | X\$18=                  |                        |
|  | Independent                              | *                                | Minus          | ***         |                                     | =                |      | X42=                |                        | OR | X84=                    |                        |
| Ā  | FIRST PRESE                              | NTATION OF M                     | ULTIPLE DE     | PENDEN      | NT CLAIM                            |                  |      | 1110                |                        | 1  | +280=                   |                        |
|  |  |                                  |                |             |                                     |                  |      | +140=               |                        | OR | TOTA                    |                        |
|  |  |                                  |                |             |                                     |                  |      | ADDIT. FEE          |                        | OR | ADDIT. FE               | E <b>L</b>             |
|  |  | (Column 1)                       |                |             | umn 2)                              | (Column 3        | )    |                     |                        | 7  |                         | 1                      |
| AMENDMENT C  |  | CLAIMS REMAINING AFTER AMENDMENT |                | NL<br>PRE   | GHEST<br>JMBER<br>VIOUSLY<br>JD FOR | PRESENT<br>EXTRA |      | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total                                    |                                  | Minus          | **          |                                     | =                | _    | X\$ 9=              |                        | OF | X\$18=                  |                        |
|  | Independent                              |                                  | Minus          | ***         |                                     | -                |      | X42=                |                        | OF | X84=                    |                        |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDEN  |                                  |                |             |                                     | M                |      | +140=               |                        | OF | +280=                   |                        |
|  | * If the entry in col                    | umn 1 is less than               | the entry in C | olumn 2, y  | vrite "0" in                        | column 3.        | ac • | TOTA                |                        | OF | TOTA                    |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |                                  |                |             |                                     |                  |      |                     |                        |    |                         | : C L                  |
| 1  |  |                                  |                |             |                                     |                  |      |                     |                        |    |                         | 05 00111500            |